## PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2003

10775793

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TO	OTAL CLAIMS	<u> </u>	14	111	(00,0	رع الآلاد	l. ,			OR <b>T</b> I			
FOR			1 ' '	NUMBER FILED		NUMBER EXTRA		RATE BASIC FEE	FEE 385.00		RATE BASIC FEE	FEE 770.00	
$\vdash_{TC}$	OTAL CHARGEA	ARI F CLAIMS	1 1/1	10		*		\\\(\alpha\)		1			
H				/ Minus 20=		*		X\$ 9=	<u> </u>	OR	X\$18=		
<u> </u>	DEPENDENT CI	CLAIMS NDENT CLAIM PI		inus 3 =	<u> </u>			X43=		OR	X86=		
								+145=		OR	+290=		
* If	the difference	e in column 1 is	less than ze	∍ro, enter	"0" in c	olumn 2	-	TOTAL	385	OR	TOTAL	שרר	
	C	CLAIMS AS A	MENDED					OTHER THAN SMALL ENTITY OR SMALL ENTITY					
		(Column 1)	<del></del>	(Colum		(Column 3)	1 'F	SMALL		OR 1 I	SMALL		
ENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
<b>AMENDMENT</b>	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=	] ]	X43=		OR	X86=		
لـــا	FIRST PRESE	] [	+145=		OR	+290=							
		1-5-	. (				L	TOTAL		┪ <sub>╱</sub> ╴┖	TOTAL		
		Α	ADDIT. FEE	L	OR ,	ADDIT. FEE							
		(Column 1) CLAIMS		(Colum	EST	(Column 3)	1 _	· · · · · · · · · · · · · · · · · · ·	ADDI-	ır		ADDI-	
ENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		<sup>ֈ</sup>	+145=			+290=		
								+145=		OR	+290= TOTAL		
			AI	DDIT. FEE		OR A	ADDIT. FEE						
—		(Column 1)	<del>- `                                   </del>	(Column 3)			·	_					
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	<u> </u>	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-	Un	<del></del> †		
* If	the entry in colur	mn 1 is less than the	L	+145=		OR	+290=	·					
** If	f the "Highest Nuπ	mn T is less than the mber Previously Pai mber Previously Pai	id For" IN THIS	S SPACE is	less than	1 20, enter "20."	, AC	TOTAL DDIT. FEE	·	OR A	TOTAL DDIT. FEE		
T	he "Highest Num	nber Previously Paid	J For" (Total or	Independer	nt) is th	highest number	r found	d in the appr	ropriate box	in colu	ımn 1.		